

02-28-04

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26345 7590 11/25/2003

**GIBBONS, DEL DEO, DOLAN, GRIFFINGER & VECCHIONE**  
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<u>Bosangela Medina</u>	(Depositor's name)
	(Signature)
<u>02/23/04</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/775,743	02/02/2001	Lioudmila Tchistiakova	082181-36154	9394

**TITLE OF INVENTION:** LIGAND FOR VASCULAR ENDOTHELIAL GROWTH FACTOR RECEPTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	02/25/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHERNYSHEV, OLGA N	1646	424-143100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Gibbons, Del Deo,  
x Dolan, Griffinger  
and Vecchione

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT** (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Supratek Pharma, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Canada

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

**4a. The following fee(s) are enclosed:**

- ☒ Issue Fee
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**02/27/2004 MBELETE2 00000153 09775743**

**01 FC:2501**  
**02 FC:1504**

**665.00 OP**  
**300.00 OP**

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